

## DASA Provides Forum to “Bridge the Gaps” Between Practice, Policy, and Research

By *Toni Krupski, Ph.D.,*  
*DASA Research Administrator*

Research-based “best practices” in the areas of co-occurring disorders (with an emphasis on schizophrenia and bipolar disorders), prevention, treatment retention, and adolescent treatment were featured in sessions led by nationally recognized speakers. Responder panels, consisting of state-wide leaders in chemical dependency treatment, research, and policy responded to each speaker. For example, Lieutenant Governor Brad Owen, Senator Jeanine Long, Representative Mary Lou Dickerson, and Jane Beyer (Senior Council to the Democratic Caucus) all served on panels responding from their perspective as policy makers.

In discussion groups following each panel, conference participants were asked to identify best practices they would consider incorporating into community-based services. Some that they identified were:

- > Case management
- > Motivational skills/Engagement techniques
- > Strength-based approaches
- > Use of data to inform and improve practice

Some common barriers to incorporating best practices included the following:

- > Disconnected systems
- > Time and money
- > Insufficient skill development opportunities

DASA’s annual research conference was held in December near SeaTac. Over 200 people attended the two-day event. The theme was “Bridging the Gaps” between practice, policy, and research.

> Lack of knowledge of what works  
Finally, conference participants identified changes that could facilitate incorporating best practices into community-based services. These included:

- > Create reimbursement for case management
- > Create more in-depth training/skill building (as opposed to short-term information training)
- > Increase collaboration between the chemical dependency field and other systems (including mental health, corrections, child welfare, public assistance, etc.)
- > Integrate funding streams
- > Make TARGET data reports available on a regular basis
- > Build a better information dissemination system within the state

A follow-up session to the research conference will take place at the DASA Public Policy Forum scheduled for February 26 and 27, 2001. Progress on recommendations, including those listed above, will be featured.

Questions or comments about the DASA Research Conference should be directed to Toni Krupski at (360) 438-8206 or at [krupstk@dshs.wa.gov](mailto:krupstk@dshs.wa.gov). 🐼

## InSide

DASA Provides Forum to “Bridge the Gaps” Between Practice, Policy, and Research

...Feature Story

Treatment Retention: A Matter of Health ...Page 2

Do You Have A “Good News” Story? ...Page 2

New Timelines For Adoption and Safe Families Act ...Page 3

Improving Services For Clients Who Are Deaf and Hearing Impaired ...Page 3

Upcoming Awareness and Education Events ...Page 3

MARIJUANA: Adults Debate Risk While Youth Get Addicted ...Page 4

The Washington State F.A.M.E. Model ...Page 5

Retreat on Women’s Substance Abuse Issues A Success ...Page 6

Setting It Straight ...Page 6

Youth Treatment Conference Focuses on Health, Healing and Hope ...Page 7

FOCUS Readers Give Feedback ...Page 8

SIG Community Projects Presented to Governor ...Page 8

New Video by Teens Shows Real Consequences of Meth Use ...Page 9

Drug Courts Effective But Struggle to Survive ...Page 9

HASAP Program Highlighted at National AIDS Conference ...Page 9

Prevention Summit Draws Record Attendance ...Page 10

## FOCUS

Table of Contents continued

Group Care Enhancement in Clark County ...Page 10

Celebrating Native American Day ...Page 11

PDFa Announces Redesign of Website ...Page 11

Performance Assessment of Opioid Treatment Programs ...Page 12

Improving ADATSA Bed Utilization ...Page 12

Substance Abuse Treatment and Employment Outcomes ...Page 13

New Program Services Staff ...Page 13

New Book on Understanding Alcoholism ...Page 14

Increasing Access Through Interpreter Services ...Page 14

2001 Diversity Calendar ...Page 16

## Letters to the Editor

Please send questions, comments or suggestions for articles to:

Deb Schnellman

PO Box 45330

Olympia, WA 98504-5330

email: [schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov)

### Washington State Resources

Alcohol/Drug 24-Hour Helpline:

1-800-562-1240

[www.adhl.org](http://www.adhl.org)

Alcohol/Drug Clearinghouse:

1-800-662-9111

[www.adhl.org/clearinghouse](http://www.adhl.org/clearinghouse)

### DSHS Secretary

Dennis Braddock

### DASA Director

Ken Stark

### Newsletter Coordinator

Deb Schnellman

FOCUS is published quarterly for those in the chemical dependency field by the Division of Alcohol and Substance Abuse, within the Washington State Department of Social & Health Services.



*From the Director*

## Treatment Retention: A Matter of Health

*By Ken Stark*

Alcoholism and other drug addictions continue to be the number one health problem in this country. These conditions contribute significantly to a myriad of medical conditions costing taxpayers in Washington State hundreds of millions of dollars – not to mention the personal tragedies experienced by the affected individuals. The good news is that our publicly-funded treatment programs are working; significant improvements in health status are achieved for consumers who participate in treatment.

While we should rejoice at our successes, we must also strive to improve our outcomes wherever and whenever the opportunity presents itself. We know, for instance, that some treatment is better than no treatment. However, research tells us that those consumers who stay in treatment longer (and complete treatment) have the best outcomes. Yet, we continue to see a significant number of consumers who either abort treatment or are discharged for rule violations. These noncompleting consumers are more likely to continue their alcohol/drug use and less likely to experience improvements in their health status.

In an effort to improve treatment outcomes, we need to focus on improving treatment retention. Do we see the behavioral red flags or verbal cues consumers in treatment may be giving us to predict a future abort or rule violation? Is it as simple as a brief individual acknowledgment or random act of kindness that would encourage that person, at that time, to stay in treatment? Whatever the case may be, for the consumers we serve, improving treatment retention is a matter of health. 🐾

## Do You Have A “Good News” Story?

How many people in your community are aware of the positive changes you and your organization are making in reducing substance abuse? Increasing our programs' visibility and support in the community is vital to our growth and continued ability to provide services.

DASA is collecting “good news” stories of people who have been helped by substance abuse prevention, intervention, treatment and recovery programs. The success stories, and the agencies which made them possible, will be promoted to the media.

To see examples of stories that have already

been submitted (including one about a formerly homeless and drug addicted woman who is now an honor student in college), go to the new DSHS homepage, [www.wa.gov/dshs](http://www.wa.gov/dshs), and click on “Real Heroes”.

We encourage our community partners to join in creating greater awareness among our public and our policy makers that prevention and treatment works, that we are making a difference, and that more support is needed to reduce substance abuse. Send story ideas to Deb Schnellman at [schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov) or by fax: (360) 438-8057. 🐾

# New Timelines For Adoption and Safe Families Act: Implications for Clients and Providers

By Pennie Sherman, Planning and Policy Specialist

Many clients in publicly funded substance abuse treatment are also involved with the state's child welfare system and attempting to comply with the new timelines for termination of parental rights as mandated in the federal Adoption and Safe Families Act (ASFA). The chemical dependency treatment provider needs to be aware of ASFA provisions, understand the implications for the client, and assist the client to achieve the treatment goals set by the courts and the child welfare agency.

ASFA emphasizes the safety of children in making permanency decisions and creates new timelines for the decision making process. Under ASFA, a "permanency plan" for reuniting the child with the biological family, or preparing for adoption or another permanent outcome, is required within 12 months of

entering foster care (down from 18 months in the old law). If a child has been in foster care for 15 of the most recent 22 months, the state must start the process of terminating parental rights.

The new timelines require parents to follow-through with court ordered services quickly, and social service agencies to provide timely and well-coordinated services. When working with parents or families of children in foster care, it is important to realize that "the clock is ticking." The following are suggestions for helping these families:

- > Emphasize the gravity of their situation. They have 12 to 15 months to effect change and resisting will simply use up time.
- > Encourage your clients to cooperate with the Division of Children and Family Services from the beginning and to

participate with them in making decisions for the child.

- > Coordinate services with other agencies as early as possible.
- > Figure out how to share information with other agencies and stay within the confidentiality provisions of 42 CFR Part 2.
- > Advocate for timely services for your clients and create partnerships with other social service agencies.
- > In Washington State, the courts seldom grant exceptions to the timelines. Keep your perspective on realistic treatment goals for the parent and the long term best interest for both the parent and the child.

For more detailed information about the Adoption and Safe Families Act contact Ken Guza at (360) 438-8091 or [guzakw@dshs.wa.gov](mailto:guzakw@dshs.wa.gov). 🐼

## Improving Services For Clients Who Are Deaf and Hearing Impaired

By Jackie Hyman, Director of NWDAC

Last Fall the first chemical dependency training conference to focus on working with deaf and hard of hearing clients was held in Vancouver, Washington. This conference was sponsored through the cooperative and collaborative efforts of DASA, Northwest Deaf Addiction Center, Pacific Crest Consortium and many other local and state agencies that serve deaf clients.

The purpose of the conference was to introduce professionals who work with deaf and hard of hearing individuals to the unique chemical dependency treatment and recovery needs of this community, and to provide members of the deaf and hard of hearing communities with information related to recovery, treatment and other health topics.

Sign language interpreters were trained on what to expect in chemical dependency and 12-step recovery settings and to gain knowledge of the concepts behind the specific language involved.

The conference was a great success and participants hope that it is the first of many to come. Some participant comments were: "great trainers who have REAL life experience and know the trenches" "I will be more of an advocate for the deaf having access to CD treatment and support in aftercare," "I was thrilled with the level of instruction and with the opportunity to hear from deaf participants."

Northwest Deaf Addiction Center is an inpatient CD treatment program in Vancouver that will open its doors soon. For more information, contact Jackie Hyman, director of NWDAC, at (360) 260-0472 or 2402 Broadway, Vancouver, WA 98663. 🐼

## Upcoming Awareness and Education Events for 2001

April	
April	Drug Free Washington Month <a href="http://www.adhl.org/clearinghouse">www.adhl.org/clearinghouse</a>
April 2-5	NW Indian Youth Conference Spokane, 1-877-301-4557
April 5-6	Co-occurring Disorders Conference Yakima, (360) 438-8220
April 16-17	Media Literacy Conference Spokane, (206) 543-9414
May	
May 4-6	Washington PTA Convention Seattle, 1-800-562-3804
May 10-11	Washington SADD Conference 1-877-472-2543
May 11	GLBTQ Youth Conference Fife, 1-877-301-4557
May 15-16	Drug Affected Families Conference Fife, (360) 438-8220

## The prevalence of cannabis use is rising among adolescents

There is a drug being used by many adults and adolescents that, depending upon who you talk to, may be harmless and non-addictive or dangerous and capable of causing addiction. It would seem to make sense that the more confusion and debate there is about the dangers of a drug of abuse, the more difficult it would be to establish the truth about it, and convince those having problems with it to stop using it. Well, marijuana is that drug, and all you have to do is look at a number of recent trends and studies to see how confused we are about the risks.

The prevalence of cannabis use is rising among adolescents. The federal Substance Abuse and Mental Health Services Administration (SAMHSA) released a new report in September which revealed that adolescent (age 12 – 17) treatment admissions for marijuana increased by 155 percent from 1993 to 1998. The number of adolescent admissions for treatment of dependence on any drug increased by 45 percent in that same period.

For Washington, adolescents receiving treatment funded by DASA most frequently cite marijuana as their primary drug of abuse. In 1993, 62 percent of DASA-funded adolescents cited alcohol as their primary drug, with 28 percent citing marijuana as primary. In 1998, only 27 percent of DASA-funded youth cited al-

cohol as their primary drug, with 56 percent citing marijuana as primary.

This is a very dramatic change in primary drugs of abuse, a literal “flip-flop” between alcohol and marijuana over a five-year period. The increase in marijuana as a primary drug of abuse among adolescents admitted to publicly-funded treatment parallels the Washington findings of increased marijuana use and decreased perception of risk of using marijuana among 10th and 12th grade students. More older youth in school populations are using the drug and seeing it as less dangerous, and youth entering treatment are citing it as their primary drug of abuse.

This is not even the same drug most adults remember as the marijuana of the 1960s. Back then, marijuana had a THC (Delta-9-tetrahydrocannabinol) content of between .5 and 1.5 percent. Today, the THC content ranges from 8 to 20 percent, and has been recorded as high as 29.86 percent. If the alcohol content of beer had changed this much since 1960, it would now be sold as wine or “hard” alcohol.

Clinicians who treat adolescent substance users report they are working with

many more youth with serious cannabis-use disorders that both reach the level of dependence and also seem to affect the developmental maturation of these youth.

Mitchell Rosenthal, in the book *Marijuana Alert* published in 1985, stated that the focus of his concern was the drug’s potential “interference with the maturation process, and its capacity to induce regression and, at times, irreversible immaturity.” The potential for “irreversible immaturity” should cause us alarm as we address the treatment needs

of adolescents who are using marijuana at greater rates and at younger ages.

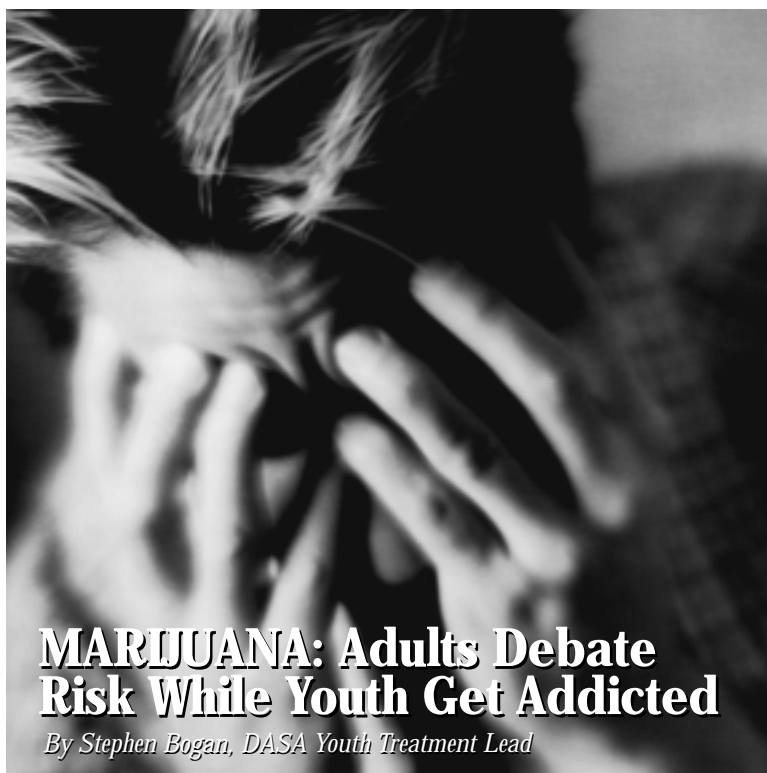
A recent newspaper article titled “New study calls pot addictive, but others disagree” cites a National Institute of Drug Abuse (NIDA) study using monkeys and self-injections of THC, showing that these monkeys repeatedly pushed a lever to get increased amounts of THC. The NIDA report states that “marijuana causes often uncontrollable craving and use, despite health and social consequences, and so is addictive.”

Yet in this same newspaper article, a Harvard Medical School professor of psychiatry states that “this drug is not addicting.” One wonders about his opinion since he happens to be the chairman of the board of the NORML Foundation, which promotes medical use of marijuana. Debates about medicinal use and legalization of marijuana have made it even more difficult to address the risks of this drug experienced by adolescents.

Even the Diagnostic and Statistical Manual (DSM) of Mental Disorders, the “authority” on diagnosis, has changed how it views the potential for marijuana abuse and dependence. The DSM gener-

### MARIJUANA: Adults Debate Risk While Youth Get Addicted

By Stephen Bogan, DASA Youth Treatment Lead



ally qualifies drug use which results in dependence to include evidence of tolerance and withdrawal. Successive editions of the DSM have not included the existence of “withdrawal” for cannabis, therefore adding confusion to those who ask “is this drug addictive like other drugs?” The latest edition, DSM-IVR, does include withdrawal for marijuana dependence, but notes that it had not been reliably shown to be clinically significant.

Counter that with findings from a NIDA study which found that “...in real-world situations abstinence from daily marijuana smoking creates withdrawal symptoms similar to those of other drugs of abuse.”

One research article that does address the clinical significance of marijuana addiction in adolescents came out in *Drug and Alcohol Dependence* in 1998. The title of the article is “Cannabis Dependence, Withdrawal, and Reinforcing Effects Among Adolescents With Conduct Disorder Symptoms.”

This screening and diagnostic study followed adolescents who met the diagnosis for marijuana dependence and had at least three lifetime conduct disorder symptoms. The results showed that most of the youth patients in the study claimed serious problems from cannabis, and over 78 percent met standard adult criteria for

cannabis dependence, while two-thirds reported withdrawal symptoms. Progression from first to regular use was as rapid as tobacco progression, and more rapid than that of alcohol, suggesting that cannabis is a reinforcer.

The data indicate that for adolescents with conduct problems, cannabis use is not benign, and that the drug potentially reinforces cannabis taking, producing both dependence and withdrawal. The authors of the study state that the findings

“The dramatic increase in adolescent admissions for treatment of marijuana use shows that marijuana is a dangerous and addictive drug.”

– Nelba Chavez, Ph.D.,  
SAMHSA Administrator

from this severely-affected clinical population should not be generalized broadly to other adolescents.

If we consider that most of the DASA-funded youth receiving chemical dependency treatment have a number of lifetime conduct disorder symptoms, the results of this study would have critical applications to improving treatment for these youth. The most striking implication would be that the youth in this study were able to identify, describe, and understand the major symptoms of addic-

tion related to their marijuana use. Clinicians who work with addicted youth often express that because society and the “experts” are confused about the addictive potential of marijuana, then adolescents must be as well. The results of this study appear to strongly contradict this.

It is encouraging to note that SAMHSA just announced the Center for Substance Abuse Treatment (CSAT) Cannabis Youth Treatment Experiment (CYTE) Preliminary Findings, which outlines five effective models that can be used to treat adolescents depending on the severity of marijuana use. “The dramatic increase in adolescent admissions for treatment of marijuana use shows that marijuana is a dangerous and addictive drug,” says Nelba Chavez, Ph.D.,

SAMHSA Administrator. The five treatment models used in the CYTE were able to reduce days of use of marijuana by 36 percent. This decrease in rate of use is better than all prior studies of adolescent outpatient treatment in community settings.

Assisting treatment programs in becoming more knowledgeable and responsive to marijuana as a primary drug of choice and as a drug of dependence in youth will make treatment more relevant and may improve treatment outcomes. 🐾

## Alcohol Underage Stings:

### The Washington State F.A.M.E. Model

By Letty Mendez, Program Manager, Washington Coalition to Reduce Underage Drinking

The Washington F.A.M.E. project (Furnishing Alcohol to Minors Enforcement) was recently featured at the National Leadership Conference’s Enforcing the Underage Drinking Laws Program, entitled “Working Together, Celebrating Successes.” Chief Raul Almeida of the Mabton Police Department gave an overview of this innovative pilot project, and law enforcement’s efforts to reduce underage drinking.

The F.A.M.E. project was developed by the Yakima Valley Reducing Underage Drinking (RUAD) Team as part of the Office of Juvenile Justice and Delinquency Prevention federal block grant jointly administered through the DSHS-Division of Alcohol and Substance Abuse and the

Washington Traffic Safety Commission. The team consisted of Mabton, Grandview, and Sunnyside Police Departments, the Yakima County Sheriff’s Office, and state agencies.

This project uses Police Explorers as operatives in “shoulder-tap” stings. It addresses the recruitment and safety of youth operatives, videotaped stings, and use of a toll-free tip line.

Components of the F.A.M.E. project are:

- A) Lesson Plan/Curriculum
- B) Educational video presentation (English and Spanish)
- C) Media Outreach Strategies (Prevention and Enforcement)
- D) A report documenting successful implementation of the F.A.M.E. model in a rural setting.

For more information about this project, contact Letty Mendez at (360) 753-6197 or [lmendez@wtsc.wa.gov](mailto:lmendez@wtsc.wa.gov). 🐾

## Retreat on Women's Substance Abuse Issues A Success

By Amy Gostovich, Human Resources Administrator, Triumph Treatment Services

The Washington State Coalition on Women's Substance Abuse Issues (WSCWSAI) held its 10th Annual Conference this Fall in Leavenworth. Approximately 142 people attended.

The conference, "Health in Recovery: Linkages that Work" provides a format for attendees to learn new skills, reinforce the skills and programs which they current offer, and generates strategies to improve the effectiveness of women's treatment and improve outcomes for high-risk women and children.

A variety of workshops emphasized health and recovery for women. A sample of topics covered were nicotine addiction, depression, exercise and recovery, relaxation, and nutrition.

gave the keynote address.

During the annual business meeting of the Coalition the steering committee was elected. The accomplishments of the Coalition in the past year were discussed with an emphasis on urging members to become involved in the political process and potential issues in the Legislative session.

The Coalition is pleased, and congratulates DASA on the implementation of two comprehensive pilot projects to provide treatment and wraparound services, including outreach for pregnant and parenting women in two new regions of the state. The Coalition was supportive of the appropriation of funding for these two pilot projects and looks

Cherlyne Short, Director of Business Development at Cirque Lodge in Sundance, Utah

forward to further such activities in the state supported by DASA and other organizations concerned with families, children, and substance abuse.

Karen Christensen did a great job as conference coordinator. Participants found the conference exciting, rewarding, and supportive. The Coalition looks forward to their 11th Annual Conference, which will be held in October 2001.

DASA supports this conference through scholarships, funds for conference coordination and staff time. Additionally, there were 15 other agencies that provided financial support. For further information about the conference or about the Washington State Coalition on Women's Substance Abuse Issues, contact any of the officers of the Coalition including co-chairs, Marilyn Bordner and Sharon Toquinto c/o WSCWSAI, P.O. Box 907, Yakima, WA 98907. 🐾

## How Much Of Your Check Goes Up In Smoke?



Plenty, if you use tobacco.

Most smokers want to quit and many have tried to stop and failed before – because kicking the habit and quitting for good takes practice.

You can be on your way to freedom by calling the Tobacco Quit Line.

Trained cessation specialists, free one-on-one counseling and referrals to local resources – plus customized quitting plans – all proven techniques to help you succeed.

You can quit tobacco. Call toll free for support.

# 1-877-270-STOP

Washington's Tobacco Quit Line: It's Your Call



## Setting It Straight

The following correction was requested by Jay Renaud regarding his article in the Fall 2000 issue of FOCUS titled "Acupuncture: An Emerging Recovery Tool":

"... Unfortunately, the photo which you ran with the article portrays an acupuncture needle being applied to a person's back. The person appears to be disrobed and lying down. This



gives a totally wrong depiction of the treatment which the article describes. That treatment, the international standard set forth by the National Acupuncture Detoxification Association (NADA) uses acupuncture needles applied ONLY

to the outer ear. Patients are fully clothed and sitting in a chair while receiving this treatment. In contrast, the type of treatment you portray in the photo is entirely unsuitable for use in the sort of comprehensive addiction treatment program for which the NADA protocol is intended."

In addition, Pat Knox, Detox Director for Recovery Centers of King County, requested the following correction to the article:

"Our agency's name was quoted incorrectly as King County Recovery Centers and Detox Facility. Also, readers may have had the false impression that 200 people per month receive acu-detox in our detoxification center. In reality, only a handful of our clients receive acu-detox." 🐾

## Youth Treatment Conference Focuses on Health, Healing and Hope

By Stephen Bogan, Youth Treatment Lead

The Sixth Annual Youth Treatment Conference was held in October at Tall Timbers Retreat Center near Leavenworth. This year the 130 attendees from a wide variety of treatment settings were treated to spectacular fall colors, majestic mountains, and a troublesome bridge under construction.

The two day conference, known as "counselor camp", focuses on counselors and their need for coming together in an informal setting to share and support the important work they do with at-risk youth. This year's theme was health, healing, and hope for those who do this difficult

work. Evonne Hedgepeth was one of several keynote speakers presenting on a variety of topics. Evonne addressed the needs of sexual minority youth in treatment. Other topics included current drugs of abuse, counselor self-care, cultural diversity, legal issues, sexual offender youth, and group process. A Native American drumming ceremony and a Twelve-Step meeting around a campfire rounded off the evening.

The Division of Alcohol and Substance Abuse presented the Thelma B. Robinson Award to Mark Wirschem, formerly of Juvenile Rehabilitation Administration (JRA), Christine Rumney of Sundown M Ranch in Yakima, and the JRA State-wide Substance Abuse Oversight Committee. The award honors Thelma who was a man-

ager at DASA who worked with community programs assisting at-risk youth.

This year's Richard Rivera Male Passionate Youth Professional Award was presented to Rudy Ramirez of Dependency Health Services in Yakima, Les Martin of SeaMar Visions in Bellingham, and Michael Stewart

of Sundown M Ranch in Yakima. This award honors the many accomplishments of Richard Rivera, who devoted many years of his life to working with youth in many treatment settings.

The Youth Treatment Conference was co-sponsored by the Washington State Adolescent Chemical Dependency Treatment Providers Association and DASA. 🐼



Mark Wirschem received the "Thelma B. Robinson" award

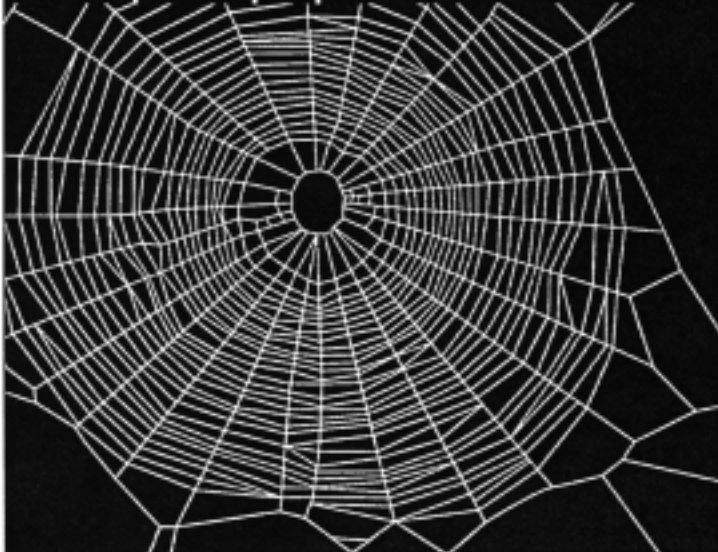


Michael Stewart received the "Richard Rivera" award



The JRA Substance Abuse Oversight Committee was awarded the "Thelma B. Robinson" award

A normal spider can spin a perfect web and catch a million flies.



A stoned spider can only hope the fly is stoned too.



NASA research shows how pot can affect a spider's ability to spin a web. Which makes you wonder just how harmless marijuana really is. Talk to your kids about pot.

**PARTNERSHIP FOR A DRUG-FREE WASHINGTON**

**1-800-662-9111**

Member of Partnership for a Drug-free America

## FOCUS Readers Give Feedback

The FOCUS Newsletter Committee greatly appreciates all the readers who took the time to complete and send in the reader survey that appeared in the Summer 2000 issue. Your responses will help us to provide you with the information you want the most. As a result of your feedback, we have already made changes to the color and layout of FOCUS, and will be including articles on suggested topics in future issues. Thank you for sharing your thoughts and ideas. Here is a summary of what readers said:

How well does FOCUS inform you about:	Good to Excellent		Which best reflects your opinion of FOCUS:			
	Good to Excellent	Below Average	Always/Usually	Sometimes	Never	Don't Know
Programs and activities of DASA .....	99%	1%	Informative .....	99%	1%	
Mission, goals and policies of DASA .....	100%		Interesting .....	81%	19%	
Substance abuse news .....	100%		Believable .....	100%		
New developments/issues related to the substance abuse field in general .....	98%	2%	Timely .....	75%	24%	1%
			Easy to read .....	87%	13%	
			Attractive .....	79%	19%	1% 1%

### Topics I would like to read more about:

- > Controversial/differing treatment models
- > Events in communities statewide
- > Letters from the field
- > Local county issues
- > Drug research/"popular" drugs
- > Collaborative treatment
- > Regulation issues
- > Prevention successes/media
- > Short in-depth articles/specifics
- > Mentoring new counselors
- > Methadone/guest column
- > New treatment ideas/seminars/people
- > New research on abusers
- > How to classify NSP with ASAM
- > Job openings
- > Women's issues
- > What works/innovative approaches
- > Recognize some CD counselors

## SIG Community Projects Presented to Governor

By Louis Thadei, SIG Community Projects Liaison

The State Incentive Grant (SIG) Community Projects presented their Year 1 project updates to the Governor's Substance Abuse Prevention Advisory Committee for review and comments in October. Among projects profiled by grantees are youth focused science-based approaches targeting risk factors such as: Friends Who Engage in the Problem Behavior, Alienation and Rebelliousness, and Early Initiation of the Problem Behavior.

Some of the projects are: The Soap Lake Reconnecting Youth Program (Grant County), Boys and Girls Club (Othello Prevention Collaboration), Juvenile Violence Prevention, Child Capacity Grant for Expanding Services, Smart Girls (a teen pregnancy prevention program) and the Street Smart program, in collaboration with the Toppenish Police Department

community service program. Youth engage in uplifting community service and pro-social activity around the Sandhill Crane Festival, Fiesta Amistad,

Halloween and Christmas Carnivals, community clean-up, and nursing home visits.

Addressing collaborative work within the community, the Snoqualmie Valley Community Network supported reduction of risk factors around community disorganization. They spoke of collaborative efforts to leverage funding and support for each other's projects.

All SIG Community Projects report major efforts in collaboration and the positive results from the earnest efforts. They incorporated researched pre and post-tests into the projects, which will reflect quantifiable changes in awareness, attitudes and behaviors.

The Orcas Island project supports Smart Moves and the Second Step Program. Michelle Judge reports that the community has donated a fabulous Fun

House for SIG use, and the students are enjoying their participation in the projects. Second Step has expanded from K-Grade 8. Michelle says, "Maybe the most exciting part of the SIG grant is to see the communities coming together and the community support that recognized the issues we have in our community. As the community awareness has increased, the funding from private organizations has increased. We have been working together on prevention and really want to thank the Governor's Committee for its support and faith in our work."

With 18 community sites, and 91 community projects, the reports were exciting and reflected a growing capacity in the presentation of science-based prevention work. Jennifer Lane of Grant County said "Science-based is delivering the right amount of prevention, in the right proportion, to the target, at the right time." The SIG projects are learning more and more about the techniques of such precise work. 🐾



## New Video by Teens Shows Real Consequences of Meth Use

By Sandy Aikens, Island County Prevention Specialist

Students at South Whidbey High School recently produced a video about the dangers of using Crystal Meth. It was done as an after school project with the direction of a parent volunteer, Doug Dirkson, a professional videographer. The teens did the interviewing, acting, editing, music, and script, plus learned the technical aspects of making a video.

Doug, as the director of the project, emphasized that the process of making the video was just as important as the outcome — “kids involved had life-changing experiences.” One of the students went on to make a video yearbook for the school, sold copies of it, and received the Principals’ Award as the most improved student of the year.

Doug got permission from the school to do this project because of interest shown in the subject by kids who had seen his “anti-tobacco” video that was done with the middle school. He worked with a core group of six to eight kids who “got a kid to get another kid” as they needed them for the project. One of the big lessons from this project was that the kids got to see how many people in the community were willing to help. The school, police, emergency medical team, local hospital and health department all contributed time, energy, and money to the project. In my role as a prevention specialist I was able to secure a DASA training grant to educate the kids, and help with getting materials and community resources.

After watching the video, which contains two mothers’ stories about what meth did to their children, one high school student said “it made me scared even to try it.” Everyone who sees it is emotionally impacted. The view of meth use from those personally involved with users is a real eye-opener for kids, parents, and educators.

For more information about this project, contact Sandy Aikens at (360) 679-7350, ext. 461 or [sandya@co.island.wa.us](mailto:sandya@co.island.wa.us), or Doug Dirkson at (360) 331-3447. 🐾



## Drug Courts Effective But Struggle to Survive

By Doug Allen, Special Projects Administrator

During 1994-1995 there were three adult drug courts funded in the State of Washington by federal grants in King, Pierce, and Spokane counties. Today we have 12 county drug courts (Whatcom, Skagit, Snohomish, King, Pierce, Kitsap, Clallam, Cowlitz, Clark, Spokane, Thurston, and Yakima) and three tribal courts (Makah, Yakima, and Spokane) with resources from county, state, and federal funds. The journey has not been easy. The concept of providing treatment with strict accountability and sanctions for nonviolent, nonsexual drug related offenses has been difficult.

The facts are demonstrating drug courts are cost effective and an excellent investment of taxpayer money. There are savings to both the state and county government. An evaluation by the University of Washington, Alcohol and Drug Abuse Institute, is demonstrating that offenders who participate and complete drug court have low re-arrest rates, abstinence from drugs, improved employment, and lower health care costs.

The future is even more challenging. Providing treatment to offenders is not a popular notion, even though it is good public policy and cost effective. Currently, public treatment only serves one in five and the offender is not a priority population. Adult drug courts will continue to struggle for funds in tight budgets. Credit should be given to the Governor, Legislature, and county governments for supporting drug courts. 🐾

## HASAP Program Highlighted at National AIDS Conference

By Pam Sacks, Infectious Disease Program Manager

The Hepatitis AIDS Substance Abuse Program (HASAP) was highlighted at the recent United States Acquired Immune Deficiency Syndrome (AIDS) Conference in Atlanta, Georgia. HASAP is a statewide program of the Division of Alcohol and Substance Abuse (DASA) that enhances services for chemically dependent individuals with Infectious Diseases (e.g. HIV, Hepatitis B and C). The workshop was well attended by substance abuse treatment and HIV service providers from many other states.

It is clear that Washington State is setting precedent for providing new and innovative treatment services for individuals with Infectious Diseases. HASAP, unlike programs in other states, provides Alternative Living Enhancement services, which outstations Chemical Dependency Professionals (CDPs) in AIDS housing facilities statewide. The CDPs become an essential part of an interdisciplinary team that functions interactively and interdependently in conducting a client’s biopsychosocial assessment, treatment plan, and treatment services.

The CDPs outstationed for the HASAP program use a model known as Life Enhancement Management, which takes a compassionate, proactive, client centered approach that addresses high risk behaviors and practices associated with chemical dependency and HIV by fostering self-awareness, wellness and mental hygiene while prompting personal empowerment and medical management.

The HASAP program collaborates, networks, and encourages other agencies to provide wraparound services for individuals with infectious diseases.

If you have questions regarding the HASAP program or site locations contact Pamala Sacks at (360) 407-0373. 🐾

## Prevention Summit Draws Record Attendance

By Steve Smothers, Prevention Services Lead

The Washington State Prevention Summit 2000, "Putting the Prevention Puzzle Together: Our Challenge for the 21<sup>st</sup> Century," was held last Fall in Yakima.

Prevention tracks included mentoring, college, community, professional, law enforcement; tobacco, and youth. Keynote speakers included Jerry Tello, National Latino Fatherhoods' Family Institute; Shayne Schneider, Mentors Unlimited; and Omar Aleman, Drug Enforcement Administration Miami Field Division.

In addition to workshops, activities included the Washington State Exemplary Substance Abuse Prevention Awards, a Drug Free Washington Month theme contest, a talent show, and a diversity dance. Summit events and key prevention issues were communicated to the public through daily coverage by the news media.

A town hall meeting, moderated by Enrique Cerna of Seattle's KCTS Public Television Station, addressed underage drinking. The Washington State Coalition to Reduce Underage Drinking (RUAD), a partnership of statewide and commu-

nity-based agencies collaborating on a grant from the federal Office of Juvenile Justice and Delinquency Prevention (OJJDP), launched a new parent education campaign. A Community Tool Kit, poster, bookmark, and brochure have been developed for use by educators, prevention professionals, and others who may be in a position to reach parents. Campaign materials are available by calling the Washington State Alcohol/Drug Prevention Clearinghouse at 1-800-662-9111.

The success of the conference was due to the collaborative efforts of the following agencies: Community, Trade and Economic Development; Department of Health; Department of Social and Health Services; King County Community Organizing Program; Lieutenant Governor's Office; Liquor Control Board; Office of the Superintendent of Public Instruction; Washington State Substance Abuse College Task Force; and Washington Traffic Safety Commission.

For further information, contact Steve Smothers at (360) 438-8066, or Barb Green at (360) 438-8220. 🏠



## Group Care Enhancement in Clark County

By Ruth Leonard, At Risk Youth Coordinator

The Group Care Enhancement program provides chemical dependency services in group home facilities, which are not certified to provide chemical dependency services in Washington State. This program is currently being provided at 12 different sites across the state. Treatment interventions include individual and group counseling, assessments, referrals, and education specific to the disease of chemical dependency.

In Clark County, Cleve Thompson, Alcohol and Drug Coordinator, Washington School for the Deaf and Hard of Hearing, Pacific Crest Consortium, and the Clark County Regional Service Network (RSN) began work to provide a full-time Chemical Dependency Professional (CDP) at the Washington School for the Deaf and Hard of Hearing. This project began in November of 1999, using matching funds from the Division of Alcohol and Substance Abuse (DASA) and the Clark County RSN, with Peace Health as the treatment provider.

The initial goal, and a major hurdle, was to recruit an individual who was a CDP with a mental health background, as well as fluent in American Sign Language (ASL). This process has proved to be a daunting experience for all involved.

As many are aware there is a shortage of counselors in the field of chemical dependency, then to add on the additional requirement of

needing this individual to be fluent in ASL, and have a mental health background is an almost impossible task. The team was also looking for someone who would be a good fit with the different agencies involved as well as with the students. This search was one that ended up covering the entire United States.

The task force realized that there was a possibility that the individual that would take this position might be hard of hearing. A decision was made to transition to Pacific Crest Consortium as the treatment provider, because they are in the process of setting up the Northwest Deaf Addiction Center (NWDAC), an inpatient treatment program in Vancouver where the School for the Deaf is located. The NWDAC director signs fluently, is aware of deaf cultural needs, and can supervise the development of this position.

The good news is that Rebecca Block began working in October as the Group Care Enhancement Counselor Trainee at the Washington School for the Deaf. Rebecca has a masters in social work from Gallaudet University. She has experience working in a mental health setting and is fluent in ASL.

With Rebecca's experience and training, she will be able to provide both chemical dependency and mental health services at the school. Rebecca has taken some of the required classes to become a CDP and is currently working to complete the required 1,500 hours of supervised experience. Jackie Hyman is the director for Northwest Deaf Addiction Center, part of the Pacific Crest Consortium, and in this capacity will supervise Rebecca's internship.

For more information, contact Ruth Leonard at (360) 438-8079. 🏠

## A SIG Community Story Celebrating Native American Day 2000

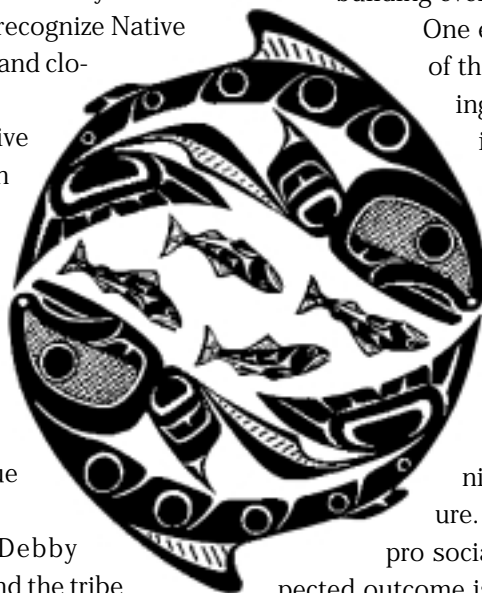
By Louis Thadei, SIG Community Projects Liaison

To celebrate Native American Day on September 25, members of the Swinomish Tribal Senate paddled a cedar canoe across the Swinomish Channel where they were greeted by the mayor and Town Council of LaConner. So began the festivities, which included races, dancing, arts and crafts, historical stories, cultural exhibits and Sla-hal Games. A salmon barbecue was well attended by Swinomish and LaConner residents with a keynote presentation by Billie Frank of the Northwest Indian Fisheries Commission.

La Conner's mayor, Eron Berg, believes his city to be the first non-Native government to formally recognize Native American Day, with official city functions and closure of selected city offices.

Staffed by Linda Day, the State Incentive Grant (SIG) Community Project Swinomish Cultural Resources Coordinator, an ad hoc planning team led by tribal and city council members, civic leaders, and youth designed and implemented the events. Linda stated that, "This was the opening of the door of culture sharing with our neighbors. We hope this is the beginning of something that will continue throughout the years."

La Conner's Finance Director, Debby Malarchick, said that bringing the town and the tribe together was a great thing for Mayor Berg to do. Mayor Berg commented that the day exceeded his expectations for a first-year event. Hundreds of people were involved throughout the day, tribal members, and La Conner residents, too.



One LaConner planning committee member tallied up the planning hours and was pleased to discover in excess of 500 hours combined working on the celebration.

Swinomish, a SIG Community Project site, reports that their SIG scope of work supported an element of the planning, administration, and evaluation of the event. The tribe, the town of LaConner, and the citizens working together made the event a possibility. Linda Day, among the dreamers working for such a celebration, is pleased to support continuation of such bridge building events.

One element of the SIG project is the validation of the tribal history within that of the surrounding community. The SIG project is partnering in the development of a curriculum for elementary students that includes teaching tribal history in the school classroom. Local celebrations such as Native American Day validate the historic and contemporary experiences of the two communities together.

Among the risk factors targeted with this project are low attachment to community values and norms, and early academic failure. Protective factors prioritized are bonding to pro social groups and sharing clear values. The expected outcome is that youth will develop positive attitudes toward school, their families, and their communities through implementation of projects such as the joint celebration of Native American Day and the Native American history elementary school curriculum. 🐟

## PDFA Announces Redesign of Website

The Partnership for a Drug Free America (PDFA) has recently added new information for families and teens to its website. Topics include:

- > How to prevent your children from using drugs
- > How to tell if your children are already using drugs
- > Which drugs kids are using and what they look like
- > Teens talking to teens about why they don't use and what their thoughts on drugs are.
- > Drug database, including info on "party" drugs
- > Research on what parents, teens and pre-teens attitudes are about drugs
- > Real stories of treatment, recovery and prevention — from real people
- > TV, radio and newspaper ads



The website address is [www.drugfreeamerica.org](http://www.drugfreeamerica.org) For more information about PDFA or Partnership for a Drug Free Washington (our state's alliance program) contact Deb Schnellman at (360) 438-8799 or [schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov). 🐟

## Performance Assessment of Opioid Treatment Programs

By Jeff Rodd, VOTE Program Case Manager

The Division of Alcohol and Substance Abuse (DASA) recently received an award from the Center For Substance Abuse Treatment (CSAT) to carry out performance assessments of opioid treatment programs.

A review by the Federal Interagency Narcotic Treatment Policy Review Board of a 1995 report published by the Institute of Medicine on "Federal Regulation of Methadone Treatment" resulted in a recommendation that the Federal oversight of opioid treatment should be changed to a regulatory model that would incorporate accreditation. The Substance Abuse and Mental Health Administration (SAMHSA) was designated the lead agency and the CSAT in SAMHSA was tasked with exploring implementation of this new regulatory/accreditation system.

As the single state agency responsible for the certification of

opioid treatment programs in the State of Washington, DASA will partner with CSAT to assess compliance of opioid treatment programs in Washington with Food and Drug Administration regulations. This will include assisting these programs in the transition to meeting the performance objectives being set forth in new FDA regulations governing the provision of opioid treatment services, which are expected to be adopted early in 2001.

Some key components incorporated into the tasks required by the above award are quality control and evaluation/outcome measurement, and when requested, the provision of technical assistance to facilitate a programmatic transition to the new FDA regulations. DASA views this as an exciting opportunity to work with opioid treatment programs statewide to enable them to continue to provide quality services while mitigating any potential impact involved in complying with the new FDA regulations.

For more information, please contact Jeffrey Rodd at (206) 464-7901. 🐼

## Improving ADATSA Bed Utilization

By Edie Henderson, Residential Services Manager

In accordance with the Alcoholism and Drug Addiction Treatment and Support Act (ADATSA), DASA has established the ADATSA Bed Utilization (ABU) Workgroup to look at the anomaly of why some residential facilities maintain wait lists, while other programs have beds that are empty. The workgroup looked at the issues that drive this phenomenon, and how DASA can improve this situation so those clients get better service.

DASA distributed a survey to adult residential providers and assessment centers and asked questions such as "How does the existing system work for you and what are the barriers and problems that you have encountered?" The surveys were analyzed, resulting in the following five recommended steps:

1. Conduct statewide and regional training workshops;
2. Develop and implement a clearinghouse;
3. Develop a directory of agencies;
4. Develop a baseline so we know if our changes are making a difference; and
5. Propose regulatory changes.


An ABU Retreat was the direct result of

that survey. There were 75 attendees at the retreat, including adult residential providers, county alcohol and drug coordinators, DASA regional administrators, and representatives of ADATSA assessment centers and detox facilities.

The first day was spent in problem identification and actions that will move us toward resolving these issues. The second morning was spent looking at what should happen next.


This was the first time these agencies have come together to look at how the system works. The response was positive from all in attendance. The ABU committee will meet again to review the outcome of the retreat and the recommendations. Many suggested future meetings to include others that were not in attendance.

The new directories of all of the adult residential providers were handed out at the retreat. The Clearinghouse began operation in January. The phone number is 1-866-244-3400 or (206) 760-3715. For more information contact Edie Henderson, Residential Services Manager, at (360) 407-0776 or hendeem@dshs.wa.gov. 🐼



**Parents: Will Your Kids Use Drugs?**

Like the risks involved in heart disease, there is research that shows that certain ~~risks~~ may be present in a young person's life that increase the possibility of that youth becoming involved in substance abuse or other problem behaviors. Likewise, there are ~~protections~~ that may exist in a young person's life or that we can cause to occur that act as a buffer for a child impacted by risks.



**To order copies of DASA's quiz for parents about risk and protective factors in their child's life, and the insert "Parents: Are Your Kids Using Drugs?", call the Washington State Alcohol/Drug Clearinghouse at 1-800-662-9111.**

# Substance Abuse Treatment and Employment Outcomes

By Felix I. Rodriguez, Ph.D., Research and Evaluation

Washington state recipients of the former AFDC program (now TANF) who participated in substance abuse treatment were more likely to be employed than those who did not, according to a report released recently by DASA.

The report is based on a study of 3,173 AFDC clients who entered state-supported inpatient, outpatient, and methadone treatment from July 1994 through June 1996. The treatment groups consisted of clients who completed treatment or had longer treatment exposure while the comparison groups consisted of clients who had only minimal treatment exposure. The study used state computer databases to track their employment and earnings within a two-year period following treatment.

The report entitled *Employment Outcomes among AFDC Recipients Treated for Substance Abuse in Washington State* may be obtained by calling the Washington State Alcohol Drug Clearinghouse at 1-800-662-9111 or at (206) 725-9696 (within Seattle or outside Washington) or by writing them at 3700 Rainier Avenue, Suite A, Seattle, Washington 98144.

## The study found that:

- > AFDC recipients in the treatment groups were more likely to become employed following treatment than those in the comparison groups: 66 percent in inpatient, 61 percent in outpatient, and 50 percent in methadone treatment versus 57 percent, 50 percent, and 38 percent in the respective comparison groups.
- > AFDC recipients in the treatment groups who were employed were more likely to have earnings of \$2,500 or more than those in the comparison groups: 41 percent in inpatient, 40 percent in outpatient, and 29 percent in methadone treatment compared to 27 percent, 30 percent, and 15 percent in the respective comparison groups.
- > AFDC recipients in the treatment groups had a higher average annual earnings during the two-year follow-up period compared to those in the comparison groups: \$4,501 in inpatient, \$5,340 in outpatient, and \$4,824 in methadone treatment compared to \$3,322, \$3,469, and \$2,554 in the respective comparison groups. 🐼

## New Program Services Staff

By Jean Phillips, DASA Administrative Services Chief

There are many new faces around the Division of Alcohol and Substance Abuse (DASA). Several new staff members have recently been hired in DASA's Program Services sections.

John Taylor is the new Region 6 Administrator, replacing Nancy Reid, who moved on to the Department of Health. John has a master's degree in Addictions Counseling and is certified as a chemical dependency counselor. He has been in the treatment and prevention field since 1985, starting as an intern and working up to administrator for chemical dependency programs in Stevens County. John is experienced in working closely with diverse populations, especially tribal organizations.

Virginia Almeida is the new Region 2 Administrator, succeeding Danny Rollins, who recently retired from DASA. Virginia is a CDP and has been in the field since 1992, starting as an intern and working her way up to director of the Yakima Farm Workers Clinic chemical dependency program, Casa de Esperanza. In addition to her intense understanding of the Hispanic community, Virginia believes strongly in cooperative work among cities, counties, and state agencies to ensure that the on-going service needs of all clients will be met.

Barbara McHenry recently became the new ADATSA Program Manager, replacing Jim Friedman, who already had a full-time job as DASA Region 4 Administrator. Barbara has spent her career as a chemical de-

pendency counselor in Tacoma, starting as an intern at Alpha House. She has also worked in a variety of settings with youth and adult patients, including a stint as Program Director at Plaza Hall and most recently as the ADATSA Program supervisor for Pierce County Alliance.

Ruth Leonard is the new Youth Services/At Risk-Runaway Youth Program Manager, replacing Darrel Streets, who moved to the Certification Section. Ruth is a CDP and has a master's degree in counseling and psychology from St. Martin's College. She came to DASA from St. Peter Chemical Dependency Center where she was the adolescent services coordinator.

Finally, Terrie Franklin is the new DASA statewide manager for the Co-Occurring Disorders and Dangerously Mentally Ill Offender (DMIO) Program. Terrie has a master's degree and over 15 years experience working in the mental health and chemical dependency fields. After graduating from the University of Puget Sound, she relocated and started her career in Johnson County, Kansas as a certified chemical dependency counselor in a residential drug treatment center. From there she moved to a clinical position at a community mental health center in the bordering Kansas City, Missouri, metropolitan area. In 1996, Ms. Franklin moved back to Pierce County where she was most recently a psychiatric evaluator within the Mental Health unit at Pierce County Jail in Tacoma.

We look forward to having all of these staff members on our team with their extensive experience and knowledge in the field of alcohol, tobacco, and other drug prevention and treatment. 🐼

## New Book on Understanding Alcoholism

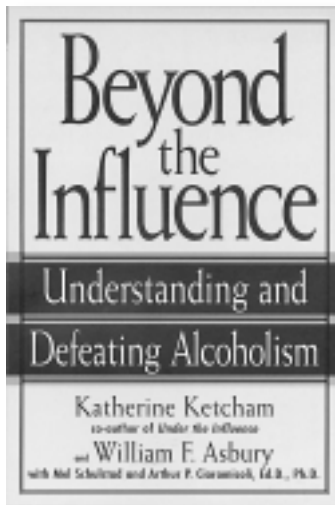
By Henry Govert, Drug Free Workplace Program Manager

A new book on understanding and treating alcoholism has become a paperback best seller in the state.

*Beyond the Influence: Understanding and Defeating Alcoholism*, published by Bantam Books, is the work of authors Katherine Ketcham of Walla Walla and Bill Asbury of Tumwater. Ms. Ketcham is the co-author (with Dr. James Milam) of the groundbreaking *Under the Influence*, published in 1981. Mr. Asbury is a retired editor of the Seattle Post-Intelligencer, and a former state trade representative in the administration of Governor Booth Gardner.

Already in its second printing, *Beyond the Influence* contains current scientific information on the drug alcohol, the disease of alcoholism,

and the need for intervention and treatment. It is recommended by some treatment centers for counselor background information. Scott Munson, Executive Director of Sundown M Ranch (who has given it to his board of directors) says that *Beyond the Influence* has given him "new insights into the treatment of this disease."



The book also ventures into socio-political areas. It faults the alcohol industry (for its political power), the government (for kowtowing to the industry, and for punishing rather than treating alcoholics), and doctors (for failing to understand and identify the disease).

*Beyond the Influence* has received a number of favorable reviews. The authoritative *Publishers Weekly* called it "a plethora of timely information; a blow to old stigmas, myths and stereotypes; and hope for a future in which many senseless tragedies can be avoided and lives saved." 🐾

## Increasing Access Through Interpreter Services

By Susan Hartman, Interpreter Services Coordinator

Over the last decade, Washington has seen a tremendous growth in the need for chemical dependency treatment services for hearing impaired and limited English speaking (LES) clients.

This growth has lead DASA to expand its statewide contracted interpreter service to include American sign language and real-time captioning services for the deaf and hard of hearing community, as well as LES services for both limited English speaking and non-English speaking clientele.

In 1995-1997, DASA provided 582 LES and

672 sign language interpreters for clients who were receiving DASA funded treatment. During the fol-

lowing six months, 1,480 LES and 580 hearing impaired clients were served, increasing the use of DASA contracted interpreters by 64.3 percent. A major part of this rapid growth was due to the influx of Southeast Asian refugees, and Russian immigrants who represented at least 36 different ethnic groups rich in their own cultural traditions, languages and histories.

When requested by a DASA-funded treatment provider, the division will also provide and pay for written translation of state or federal documents from English to other written languages, as well as sign language or real-time captioning

services for people who wish to attend DASA-sponsored prevention workshops, seminars or training events.

Real-time captioning (RTC) is a new service available through DASA. For financially-eligible clients attending a DASA-funded treatment program who are hearing impaired but cannot understand sign language or read lips, treatment providers can request RTC in place of a sign language interpreter. This specialist aids the client and counselor during treatment by typing what the counselor says on a laptop computer, thus allowing the patient to read and respond to questions.

To request interpreter services, contact Susan Hartman at (360) 438-8499 or hartmse@dshs.wa.gov. 🐾



# How To Talk To Your Kids About Drugs.

The best thing about this subject is that you don't have to do it well. You simply have to try.

If you try, your kids will get the message.

That you care about them.

That you understand something about the conflicts they face.

That you're there when they need you.

The alternative is to ignore the subject. Which means your kids are going to be listening to others who have strong opinions about the subject. Including those who use drugs. And those who sell them.

## ACCEPT REBELLION

At the heart of it, drugs, alcohol, wild hairstyles, trendy clothes, ear-splitting music, outrageous language are different ways of expressing teenage rebellion.

That's not all bad. Part of growing up is to create a separate identity, apart from parents – a process which ultimately leads to feelings of self worth. A step along that path is rebellion of one kind or another – which is to say rejecting parental values, and staking out new ones.

You did it. They're doing it. And that's the way it is.

The problem comes when kids choose a path of rebellion that hurts them, destroys their self worth, and can ultimately kill them.

That's the reality of drugs.

## DON'T GET DISCOURAGED.

When you talk to your kids about drugs, it may seem as though nothing is getting through.

Don't you believe it.

The very fact you say it gives special weight to whatever you say.

But whether or not your kids let on they've heard you, whether or not they play back your words weeks or months later, keep trying.

## START ANYWHERE.

"Have you heard about any kids using drugs?"

"What kind of drugs?"

"How do you feel about that?"



IT'S NEVER TOO EARLY TO START.

"Why do you think kids get involved with drugs?"

"How do other kids deal with peer pressure to use drugs? Which approaches make sense to you?"

"Have you talked about any of this in school?"

However you get into the subject, it's important to state exactly how strongly you feel about it. Not in threatening tones. But in matter-of-fact, unmistakably clear language:

"Drugs are a way of hurting yourself."

"Drugs take all the promise of being young and destroy it."

"I love you too much to see you throw your life down the drain."

## SOME DO'S AND DON'TS.

The do's are as simple as speaking from the heart.

The biggest don't is don't do all the talking. If you listen to your kids – really listen and read between the lines – you'll learn a lot about what they think. About drugs. About themselves. About the world. And about you. They'll also feel heard and that, too, is a step along the path towards self esteem.

There are other do's and don'ts: Don't threaten. Don't badger them. Don't put your kid on the spot by asking directly if he or she has ever tried drugs. They'll probably lie, which undermines your whole conversation.

If you suspect your child is on drugs – there are all sorts of symptoms – that's a different matter. Then you've got to confront the subject directly.

In the meantime, just talk to them.

It's okay if you don't know much about drugs.

Your kids do.

But they need to know how you feel about the subject.

And whether you care.

*For more information on how to talk with your kids about drugs, call 1-800-662-9111.*

*(Note: This and other camera-ready ads are available from DASA by calling (360) 438-8799 or e-mail: [schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov))*

## 2001 Diversity Calendar (Note: The last issue of FOCUS mistakenly contained the 2000 calendar)



**January**

January 15  
Martin Luther King Day  
(national holiday)

January 24  
Chinese New Year

January 31  
Anniversary: 13th Amendment  
Abolishes Slavery



**February**

African American History Month

February 12 Lincoln's Birthday

February 18 Chief Leschi Day

February 19 President's Day

February 22 Washington's Birthday

February 28 Ash Wednesday



**March**

National Women's History Month

March 8  
International Women's Day

March 11  
International Human Services Day

March 25  
Global Understanding Day



**April**

April 7 World Health Day

April 8 Palm Sunday/Passover

April 13 Cambodian New Year

April 15 Easter

April 22  
International Earth Day

April 25  
Professional Secretaries Day



**May**

Asian Pacific American Heritage Month

April 30 thru May 7  
Public Employees Service Week

May 5 Cinco de Mayo

May 13 Mother's Day

May 25 African Freedom Day

May 28 Memorial Day (Observed)



**June**

Gay Pride Month

June 5  
World Environmental Day

June 14 U.S. Flag Day

June 17 Father's Day

June 25 U.S. Gay Pride Day



**July**

July 1  
Canada Day

July 4  
U.S. Independence Day

July 25  
Americans With Disabilities Act  
(ADA) Anniversary



**August**

August 2  
International Friendship Day

August 26  
U.S. Women's Equality Day



**September**

Hispanic Heritage Month


September 3 Labor Day

September 16  
Mexico: Independence Day

September 19  
International Day of Peace

September 24 U.S. Indian Day

September 26 Yom Kippur



**October**

October 8  
Columbus Day (Observed)

October 12  
Washington State Children's Day

October 16 World Food Day

October 24 United Nations Day

October 26  
International Red Cross Day



**November**

Native American Heritage Month

November 11  
Veteran's Day

November 20  
Rights of the Child Day

November 22  
U.S. Thanksgiving Day



**December**

December 5  
International Volunteer Day

December 10 Human Rights Day,  
and First Day of Hanakkah

December 25 Christmas

December 26 Kwanza: African  
American Family Celebration



Division of Alcohol & Substance Abuse  
P O Box 45330  
Olympia, WA 98504-5330

Address correction requested

Please Recycle

BULK RATE  
U.S. POSTAGE PAID  
Olympia, Washington  
Permit 297